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S)ubstitute for form 1449/PTO				Complete if Known		
(Ninth Supplemental INFORMATION DISCLOSURE				Application Number	10/600,581	
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STATEMENT BY APPLICANT (Use as many sheets as necessary)				Art Unit	1637	
				Examiner Name	Kim, Young J.	
Sheet	1	of	1	Attorney Docket Number	2072.0010002/MAC	

Non Patent Literature Documents							
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T ²				
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